Skills for Developing Meaningful CE Presentations: You Can Do It!

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Objectives

- Describe two effective teaching strategies appropriate for adult learners

- List 3 cornerstones to delivering effective presentations

- Identify the key components to development of learning objectives for CME

- Demonstrate appropriate eye contact for use when delivering a didactic presentation

Audience Response System
Select the best answer:

I do educational presentations

There is no correct answer

a. Whenever I can, I love it

b. Only if I absolutely have to

c. To my students, but not practicing clinicians

d. Only in-services but nothing formal

Making a Presentation

A presentation is an opportunity to

- Influence how a clinician practices…and impact an outcome for *an individual patient*

- Project who you are: your character, personality, knowledge, and wisdom

Making a Presentation

A presentation is NOT

- A speech
- About the slides
- Facts and figures

Herman Ebbinghaus

- The typical listener
  - Forgets 40% of the presentation by ½ hour
  - By the end of the day, 60% is gone
  - A week later, the listener retains 10%
- ***Which 10% do you want?***
  - Focused messages
  - Repetition
  - Proximity

Gilman and Berg, *Get To The Point*, 1995

Adult Learners: Motivation

- To acquire new skills or knowledge **that they perceive to be applicable to their current work**
- Motivation is a blend of internal and external rewards.
- Retention rates for knowledge gained through reading, observation and lecture are fairly low!

Adult Learners: To Retain Learning

- Active, hands-on, reality-based experiences
- Learner must see a purpose for the information
- Understand, interpret, apply information
- Practice the information learned
- Continue practicing afterwards

All The Senses

- Tactile

- Auditory

- Visual

- Kinesthetic

Best and Worst??

- Think of the best and the worst talks, presentations or trainings you have attended.

- Any patterns?

Learning Increases Exponentially

- When the learner interacts
- Teaching is the most effective learning

Outline

1. PLAN
2. WRITE
3. PRESENT
4. POST-TALK
5. PRACTICE

1. PLAN

- Topic selection
- Communications with inviter or site
- Assess the target audience
- Learning objectives for CME/CNE

Topic Selection

- Something you have personal experience with?

- Do you interact with leaders in the field?

- Interested in learning more?

- Can you bring a unique contribution?

- Will you have **credibility** with this audience?

Needs Assessment

- Does your audience need this information?

- Formal vs. word of mouth

- Do you know the environment?

Communications with the Inviter

- What topics does the inviter want included?
- Might other speakers have overlapping content?
  - Topics to avoid to prevent duplication
- How much time to you have?
- Can you submit by the deadline?

Communications with the Inviter

- Logistics
  - Travel
  - Will you attend the conference?
- Honorarium/fee
  - Your charge, if asked?
  - Your minimum flat rate?

Speaker Centered

Points that the speaker wants to make

Audience Centered

What the audience wants to learn

The most powerful presentations integrate the two

Who is the Target Audience?

- Clinicians?
- Administrators?
- Educators?
- Level of sophistication?
- Is there a "most important" sub-audience?

Who is the Target Audience?

- What defines this group?

- Your commonalities with them?

- Potential areas of conflict? What and who?

- Special circumstances for this presentation?

Target Audience Profile

Check yourself as you write and speak…

- Who are you are focusing on?

- What are they expecting to hear?

- What do YOU want them to remember?

Learning Objectives

- 2-5 behavioral objectives

- Start with a verb

- Focus on measurable outcomes

- Can you watch or hear the learner demonstrate the objective after the presentation?

Audience Response System

Which of the following is a good learning objective?

a. **Correct answer: Describe three possible complications with intrauterine contraception**

b. Learn the most effective techniques for suturing

c. Appreciate the importance of efficacy in contraception

d. Strategize about solutions to systems problems in your clinic

SMART

- **S**pecific
- **M**easurable
- **A**chievable
- **R**ealistic
- **T**imed

VERBS!!!!

- Describe

- Explain

- Discuss

- Develop

- Cite

- Define
- Identify
- Recite
- Critically review
- Evaluate
- List
- Demonstrate

- Apply

- Utilize

- Prepare

- Deliver

- Recognize

- Properly differentiate

Audience Response System

Which of the following needs to be disclosed?

1. Any financial relationship with a pharmaceutical company
2. Relationships within the preceding 24 months relevant to the content
3. **Correct answer: Relationships within the preceding 12 months relevant to the content**

Disclosures

- Financial relationships with a pharmaceutical company or other type of company or entity

- In the preceding 12 months

- Relevant to material in presentation

- Could influence your presentation in any way

- List company name(s) & nature of your relationship

Disclosures

- For CME/CNE, no…
  - Advertising
  - Product-group messages
  - Company logos
  - Brand names
  - Slides or decks produced by pharmaceutical companies for promotional talks
- When mentioning off-label use, say so

In Advance

- CV
- Biosketch
- Photo
- COI/disclosures
- Pre and post tests
  - 5 short easily measurable T/F questions
  - Include the content clearly in the talk

2. WRITE

- Research content
- Refine and reinforce expertise
- Communication with experts
- Develop slide content
- Polish slide graphics
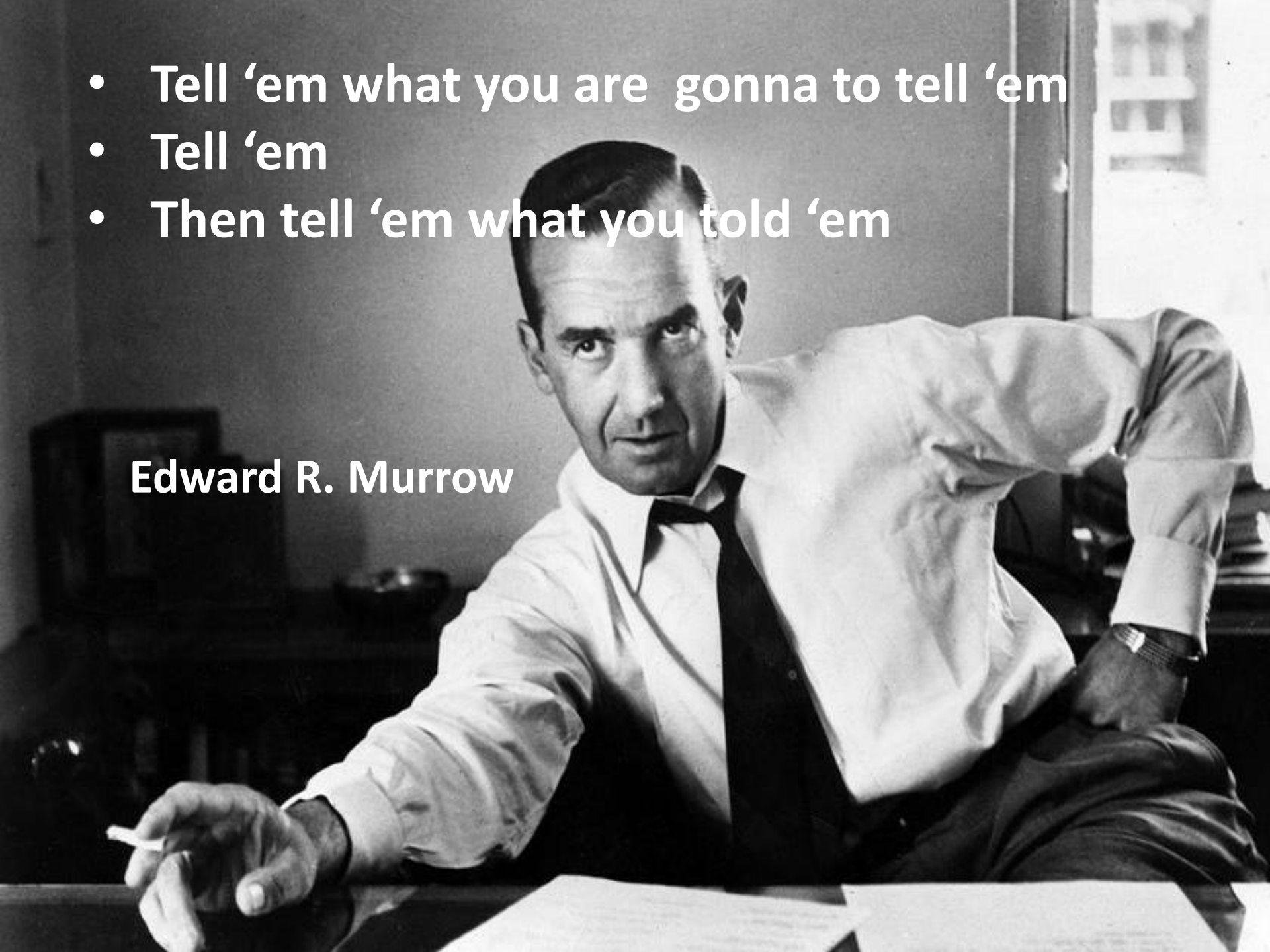
Presentations in a Nutshell

A *Memorable* Talk Must Tell a Story

An *Effective* Talk Must Address

- What?

- So what?

- Tell 'em what you are gonna to tell 'em
- Tell 'em
- Then tell 'em what you told 'em

Edward R. Murrow

What is Your Purpose?

- Inform

- Solve problems

- Persuade

- Agree on a course of action

- Sell

Selling Points

- A headline, backed up by an illustration or specific proof
  - Use vivid, visual images to illustrate
- Ask listeners to do something
  - To decide, to change, to act
- Use strong, positive words
- Keep it simple

Getting Started

Two approaches to accumulating information

- Create an outline first
  - Enter content into outline, then make slides later
- Make slides as you go

Getting Started

Use a prior talk as a starting point??

- Pro: can save time if content is accurate and up to date

- Con: "Like wearing someone else's clothes"

Researching the Topic

- Review of the literature
- Discussions with expert colleagues

Capture content as you go-- create draft bullet points that you can later synthesize into slides

Avoid Information Overload

- Focus on three important 'take home' points
- Most adults have a 20 minute saturation point

SLIDE DESIGN

Fonts

- 28 point *minimum* for best viewing.

- Do you prefer 32?

- This is **bold**

- How do you like 36?

- A combination of upper and lower case letters is More Legible Than All Capitals.

Contrast

- Can you see this?

- Contrast is important.

- Lettering should contrast with the background as much as possible.

- Avoid color combinations that *vibrate*

- Like a blue background with red lettering.

Less

- Use a minimum of words
- Limit words to five or six per line
- No more than five lines per slide
- Use entire frame for content

Visuals

- Keep visuals clear and simple

- Make words and graphics **large and bold**

- Consider the size of the room

- Don't overuse animations

Achieving Pregnancy

- Normally fertile couples having regular intercourse will conceive at a rate of approximately 20% per month

- Virtually all pregnancies result from intercourse occurring sometime within the 6-day interval ending on the day of ovulation, and that even when intercourse occurs on the very day of ovulation, the likelihood of achieving pregnancy is no greater than 35%.

- The probability of achieving a successful pregnancy per cycle ranges between 5% and 50%

Achieving Pregnancy

- Normally **fertile couples** having regular intercourse will **conceive** at a rate of approximately **20% per month**

- Virtually **all pregnancies** result from intercourse occurring sometime **within** the **6-day interval ending** on the **day of ovulation**, and that even when intercourse occurs on the very day of ovulation, the likelihood of achieving pregnancy is no greater than 35%.

- The probability of achieving a **successful pregnancy per cycle** ranges between **5% and 50%**

Fritz, M, Clinical Obstetrics and Gynecology 2012;55:692-705

Achieving Pregnancy

- **Fertile couples conceive at 20% per month**
  - **Range per cycle: 5-50%**
- **All pregnancies occur within 6-day interval ending at the day of ovulation**

Fritz, M, Clinical Obstetrics and Gynecology 2012;55:692-705

Achieving Pregnancy

- **20% per month conception rate in fertile couples**
  - **5-50% per cycle**
- **All pregnancies occur within 6-day interval ending at the day of ovulation**

Fritz M, 2012

Slide Design Pearls

- Blue slide backgrounds are "soothing"
- Red and "complex" backgrounds are distracting
- Can highlight key words or phrases with different text color
- Slide animation is for emphasis and to break monotony

DO NOT OVERUSE

Slide Design Pearls

- For guidelines, use the badge or logo

- If using a company logo, add to title slide only

- Attach photographs to a slide
  - If an image is important, show it alone

- Define acronyms

US MEC 2010: Headaches

	OC/P/R		POP		DMPA	Impl	LNG-IUD	Cu-IUD
Non-migrainous	1		1		1	1	1	1
Migraine	I	C	I	C	I		C	
Without aura								
– Age <35	2	3	1	2	2		2	1
– Age ≥35	3	4	1	2	2		2	1
With aura – Any age	4	4	2	3	2		3	1

I: Initiate   C: Continue

Screenshots

- Critical technique when referring to
  - A website
  - The title banner of a reference
  - Clinical photographs

Screenshots

Practice on your computer + PowerPoint version

1. Print screen (PS) (or Fn+PS, CTRL+PS)

2. Bring up target PP slide; hit "paste"

3. Select image; hit "crop"

4. Slide each of 4 markers to frame desired info

5. Click ESC (or any part of slide not in frame)

6. Save

SLIDE SEQUENCE

SLIDE #1: Title Slide

Title of presentation

Your name and professional degrees.

Your contact information if you choose to include it

SLIDE #2: Objectives

SLIDE #3:
Disclosures or conflicts of interest

Last Slide

- Summarize take home points

Bibliography/References

- References can be included on individual slides abbreviated:
  - Amore M. Maturitas 2007
- or listed at the end of the presentation
  - Amore M, Di Donato P, Berti A, et al. Sexual and psychological symptoms in the climacteric years. Maturitas 2007; 56: 303–311.

- Choose a format and remain consistent
- Within last 5-10 years unless landmark studies

Before Submitting the Slide Set

- "Trim" and "taut", without being gaunt!
- One slide per minute
- Keep the review of foundational (background) material succinct
- Trim excess slides repeatedly
  - Place important excess slides in Appendix

Nuts and Bolts Recommendations

Case Studies

- Audiences love them

- Cases mimic real-life medical education

- Intriguing details

- Not too complex

- Can build one case by adding to it as you go

Using Audience Response System (ARS)

- Start with a polling question to warm them up
- Example: How confident are you with "XXXX".
- Include up to 5 ARS questions
  - Too many will reduce lecture time
- Choose key points that you want to highlight

Using Audience Response System

- Brief case scenario related to management

- 4-5 answers for each question

- Design for a distribution of responses

- Adequate time for discussion of results

- Involve audience beyond results of polling question

This photo courtesy of my mother

$$ Copyright $$

- Get permission or pay for any copyrighted materials

- All photos unless you took them yourself

- Cartoons, videos, audio recordings, graphs, reprints etc.

- Request permission and attribute all borrowed slides

Using Pharma "Slide Decks"

- All slide decks are "canned"

- Best you can hope for is to be allowed to delete some slides

- Know the compliance rules so you can still have a positive impact

3. PRESENT

- Prepare yourself to present

- Presentation skills

- Common errors

- Display appropriate eye contact when conducting a presentation

- Demonstrate open relaxed body language during public speaking

Should I Do a Practice Run?

- Most helpful with a newly written talk
- Time yourself!
- Ideas
  - Practice in front of a mirror, video camera, or computer camera
  - Present to a group of colleagues; ask for their feedback & make improvements

Logistics *Before* The Talk

- Arrive early to check
  - Microphone and sound system
  - Lectern
  - Laptop or large monitor
  - Slide advance and reverse
  - Competing noise
  - Light adjustment
    - Low enough to give good contrast to slides
    - High enough to take notes

Logistics *Before* The Talk

- Your laptop or use theirs? ASK in advance
- Loading the slide set before the talk
  - "Final versions" often not permitted: ASK!
  - Get help from the AV technician
  - Bring a back-up USB drive
- *Elapsed time* of presentation
  - Clock or "count down" timer on lectern
  - Watch or cell phone (check time zone)
  - Room monitor with "time left" cue cards

Your Appearance

- Select appropriate clothing
  - Overdress rather than underdress
  - Comfortable fit, especially around neck
- Avoid
  - Large, flashy jewelry…noise, light reflections
  - Scratching your face
  - Playing with your hair, a pen, or other objects
  - Jingling keys
  - Obnoxious mannerisms

Your Body Stance

- Open stance, arms in front
    - Stand erect
    - To emphasize points, gesture with your hands
    - Don't cross your arms
- Try to face front at all times
    - Never turn your back to the audience

Your Body Stance

- Are you pacing?
  - Occasionally move away from the podium to make a point, but don't pace
- Do you like to sway?
  - Annoying to some; could make someone nauseated!

Your Voice

- Speak clearly…enunciate!
- Vary speech patterns and voice modulation
  - Avoid monotone
- Verbal emphasis to make important points
- Pace yourself…not too fast, not too slow
- Water on the podium if you rasp or cough

Your Attitude

- Smile and look relaxed!
- "Roll with the punches"
  if technical problems
- Humor
  - Don't tell a joke unless you're a natural comedian!
  - Use cartoons sparingly and only if a clear image
  - Never use cartoons that you have to explain
- Use photos of scenery, family, or yourself
  - But only if related to the presentation

Making Eye Contact

- Divide the room into three sections

- Engage one audience member in light eye contact during discussion of one "point"

- Move to an audience member in another section of the room for the next point

- Engaging too many participants in eye contact in too short a time makes you look shifty

Taking Off and Landing

- Practice and memorize the first 90 seconds
- ALWAYS allow time for strong closure
  - "Take it Home" summary points
  - Ask the audience to *do something*
  - Something to remember you by…a quote, a photo, etc.

Building Strong Messages

- Simple everyday language
- Strong and positive
  - Use…"I believe", "I know", "I recommend"
  - Not…"I think", "it seems"
- Signal words
  - What's significant here
  - I want to stress
  - Let me underscore
  - Let's review

Introducing YOURSELF

- Your connection with the audience or the topic
  - Same type of clinician or workplace as them
  - Job, research, or publications
- Acknowledge your collaborators (a "shout out"!)
- **Keep it short**…
  - The audience is more interested in the topic
  - It will subtract time from your talk
  - Avoid egocentricity

Delivery of the Talk

- You are the focus of attention, not the slides
- Make frequent use of clinical examples to explain or emphasize a point
  - Avoid recommendations based upon 1 patient
- Don't apologize for spelling or similar errors
  - Audience doesn't notice unless you point it out

Interacting with Your Slides

- Use slides text to trigger comments
  - Never read text verbatim unless a quote
- Interpret tables and graphs, don't read them
- Do not address every line of the slide, especially when pressed for time

Interacting with Your Slides

- Avoid repeating certain phrases
  - "This slide shows"
  - "As you (well) know"
  - "In the interest of time"
  - "And finally" (until it really is finally!!)
- Keep your focus on the audience
  - Use monitor to glance downward, as needed
  - Glance at screen only when absolutely necessary

Bad Words

- Ummmmm

- Like

- Can you think of others?

- Humor "spices up" the talk and makes it more interesting and memorable

    - Some find cynicism or "black humor" offensive

Laser Pointer

- Only use when critical
- Point it at the target, turn it on briefly, then off
  - Don't wave or circle it
- Bring yours as a back-up

Keeping Track of Time

- Know *exactly* when to end talk and start Q&A

- Monitor the time every few minutes

- When running out of time, be prepared to close…don't wait until the moderator asks you

Keeping Track of Time

- If you must end before you are finished, take the last two minutes to remind the audience of the topics covered in the handout

Interacting with The Audience

- Type of audience that is capable of interacting?
- PRO: may keep the audience awake and engaged
- CON:
  - Can derail your timing
  - If a large loud audience, may fall flat
  - Many people avoid interacting with strangers
- More appropriate for workshops than lectures
- If you do it, keep it short!

Q&A *During* the Presentation

- Advanced skill

- Hard to keep to "time"

- Excellent for learners

- Control the questions/comments

- Is your content flexible

- Use few slides

Q&A *After* the Presentation

- Use Q&A to make an important point that you missed or didn't have time to cover

- Keep your answers short
  - You will be able to get to more questions

- If asked to explain a point already covered, give a "summary" answer and refer to the handout

Q&A *After* the Presentation

- Bridge to specific, positive information...facts, evidence, anecdotes that support key messages

- Avoid spending much time on (or reject) questions that seem "bizarre" or of limited applicability

- If given a stack of question cards

  – Triage into groups

  – Address key messages first

  – Important subjects not yet covered

4. POST-TALK

- Follow-up
- Evaluations
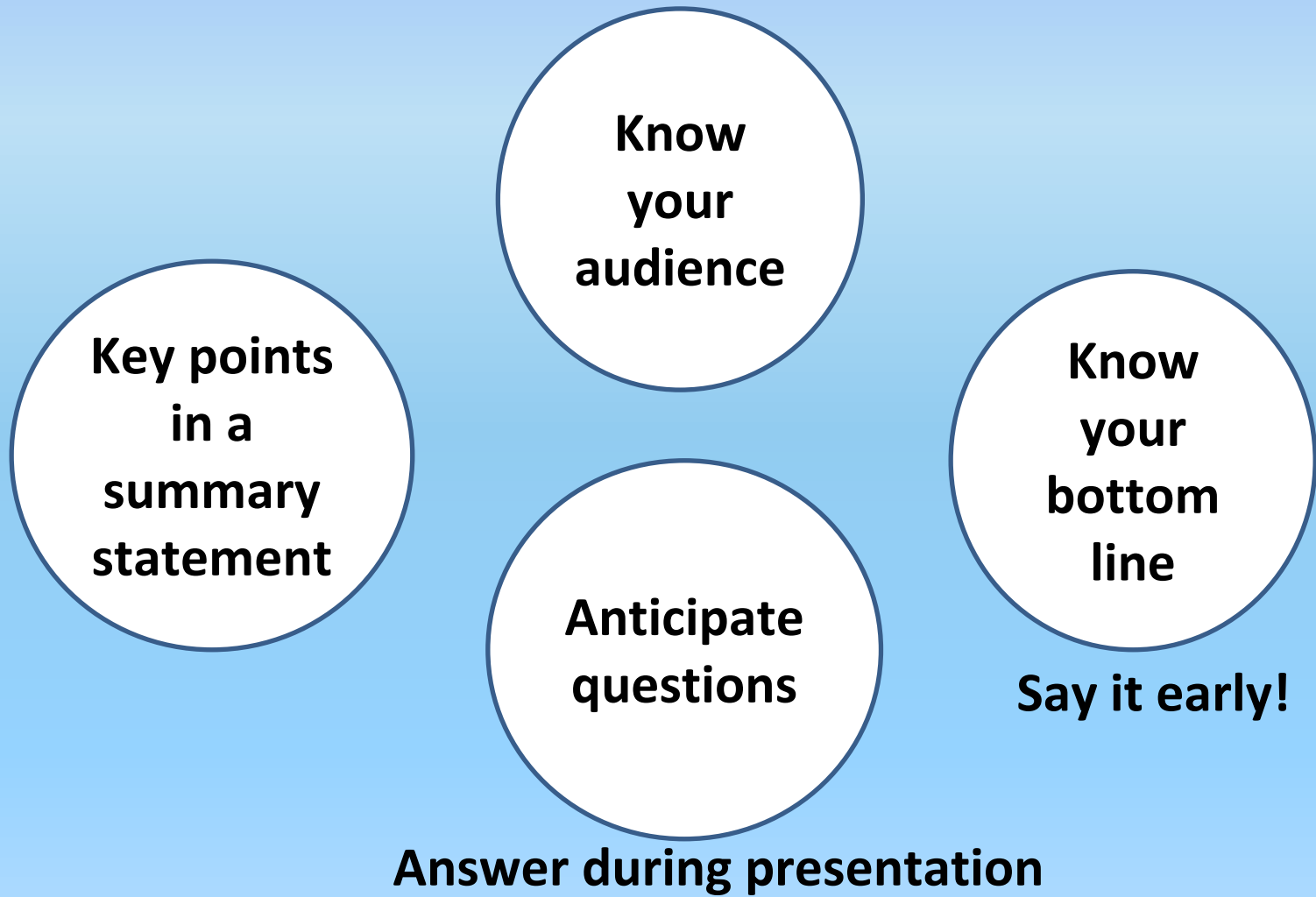- Prepare for post-test with pretest
- Modifications

After It's Over

- Edit the slide set for the next time
  - Delete or modify slides didn't work
  - Refine slides that need a tweak
  - Add slides for topics that came up in Q/A
- Review participant evaluations and comments
  - Note how you compared to other speakers
  - Take comments in stride…it's a lecture after all!

5. PRACTICE

- Write slides; including CME objectives and graphics
- Presentation skills

Basics of a Strong Presentation

Know your audience

Key points in a summary statement

Anticipate questions

Know your bottom line

Say it early!

Answer during presentation

Gilman and Berg, *Get To The Point*, 1995

CDC SOCO (Single Overriding Communication Objective)

- Key point or objective

- Three most important facts

- Message or action to take